

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T-G		4/5
O.I.P.E. CLASSIFIER		21	4/30/01
FORMALITY REVIEW	MD	579	5/10/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
+ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
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Claim	Date
Final Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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6/1/01